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<input type="checkbox"/> Request form PCT/RO/101
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| <input checked="" type="checkbox"/> Basic National Fee (or authorization to charge)
<input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input checked="" type="checkbox"/> Abstract
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<input checked="" type="checkbox"/> Application Data Sheet
<input type="checkbox"/> Power of Attorney
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1. <input type="checkbox"/> same as 371 request date 2. <input type="checkbox"/> _____
<input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on:
1. <input checked="" type="checkbox"/> same as 371 request date 2. <input type="checkbox"/> _____
<input type="checkbox"/> Assignment Document (forwarded to Assignment Branch)
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Date of Completion of DO/ EO 905 - Notification of Missing Requirements	
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